POLK COUNTY REGIONAL MENTAL HEALTH AND DISABILITY SERVICES MANAGEMENT PLAN

II. FY15 ANNUAL SERVICE AND BUDGET PLAN

PREPARED BY:



APRIL 1, 2014 (REVISED AUGUST 1, 2014)

Table of Contents

II. ANNUAL SERVICE AND BUDGET PLAN FOR FY14/15

Α.	Access Points & Care Coordination Agencies	3
	Crisis Planning	
	Scope of Services & Budget	
	Financial Forecasting Measures	
	Provider Reimbursement Provisions	

II. ANNUAL SERVICE AND BUDGET PLAN FOR FY14/15

Polk County Health Services, Inc. exists to support improved access to health care and to promote full citizenship for people with mental illness, intellectual disabilities, or developmental disabilities. This plan assumes that the state will not mandate expansion of initial core services or creation of additional core services without additional funding. This plan covers the period from July 1, 2014 through June 30, 2015.

A. Access Points & Care Coordination Agencies

An access point is a part of the Polk County regional service system that is trained to complete the MH/DD regional applications and determine service eligibility for persons with a disability. Polk County has designated the following access points, including care coordination agencies, and the services they are able to authorize.

Access Point	What Services are Authorized by this Access Point?
Broadlawns Crisis Team	Inpatient
Broadlawns Medical Center – BMC	Partial Hospitalization/Day Treatment
1801 Hickman Road	Outpatient
Des Moines, IA 50314	
Tele: (515) 282-2200	
BMC-Community Access Program	Integrated Health Home Intensive Care Coordination
2300 Euclid Ave., Suite B	Service Coordination
Des Moines, IA 50310	Community Living
Tele: (515) 282-6770	Employment/Day Services
	*Other Supports
Child Guidance Center, a division of Orchard Place	Partial Hospitalization/Day Treatment
808 5th Avenue	Outpatient
Des Moines, IA 50309	
Tele: (515) 244-2267	
Child Serve	Targeted Case Management
Box 707	Community Living
Johnston, IA 50131	Employment/Day Services
Tele: (515) 727-8750	*Other Supports
Community Support Advocates	Integrated Health Home Intensive Care Coordination
6000 Aurora Avenue, Suite B	Service Coordination
Des Moines, Iowa 50322	Targeted Case Management
Tele: (515) 883-1776	Community Living
	Employment/Day Services
	*Other Supports
Easter Seal Society	Service Coordination
2920 30 th Street	Targeted Case Management
Des Moines, IA 50310	Community Living
Tele: (515) 274–1529	Employment/Day Services
	*Other Supports

Access Point	What Services are Authorized by this Access Point?
Eyerly-Ball Community Mental Health Services	Outpatient
1301 Center Street	Integrated Health Home Intensive Care Coordination
Des Moines, IA 50309	Community Living
Tele: (515) 243-5181	Employment/Day Services
	*Other Supports
Golden Circle Behavioral Health PACT Team	*Other Supports
945 19th Street	
Des Moines, IA 50314	
Tele: (515) 241-0982	
Golden Circle Behavioral Health	Service Coordination
945 19th Street	Community Living
Des Moines, IA 50314	Employment/Day Services
Tele: (515) 241-0982	*Other Supports
Link Associates	Service Coordination
1452 29th Street	Targeted Case Management
West Des Moines, IA 50266	Community Living
Tele: (515) 262-8888	Employment/Day Services
	*Other Supports

^{*}Other Supports include transportation, homemaker, payee, rent assistance, Meals on Wheels, etc.

B. Crisis Planning

Crisis prevention, response and resolution is as much a mindset as it is a continuum of strategies and services. In the Polk County Region, crisis prevention begins with Mental Health First Aid (MHFA) training for the general public. There are multiple MHFA trainers in the Polk County area including trainers at Polk County Health Services. The Polk County Mental Health Response Team is comprised of volunteers sponsored by Polk County Health Services. The Team is available on a 24 hour basis for prevention, supportive counseling and debriefing. For Network Provider members, the Polk County Positive Behavior Support Network offers training on best practices like Positive Behavior Support, Trauma Informed Care, and Motivational Interviewing. Training prepares people to effectively create environments that prevent crisis and develop effective intervention techniques for response and resolution. Crisis prevention, response, and resolution are also embedded in the treatment and support plans that are prepared by Network Providers, Targeted Case Management, Intensive Care Coordination and Service Coordination. When these plans are developed, the goal is to figure out an environment and support structure that works for a person to mitigate the triggers that lead to crisis. Some agencies specifically use a Wellness Recovery Action Plan (WRAP) that complements the coordination plan. Polk County also offers people the opportunity to develop their own WRAP through the Network of Care website (www.pchsia.org) which is an online resource for people to manage their recovery. Much of the prevention, response, and resolution of crisis is handled through the normal services and supports people receive.

If more specialized crisis response and resolution is required to meet a person's need, Polk County has several options. At Broadlawns Medical Center, the Crisis Team is available 24 hours a day, seven days a week. The Crisis Team is available by phone or walk in. The primary goals are crisis assessment, resolution, and screening for inpatient hospitalization. The

Mobile Crisis Response Team is another option that is specifically designed to deal with mental health crises that are identified by law enforcement and can be dealt with through therapeutic intervention rather than a criminal justice intervention. For people who require a bit more stabilization after inpatient treatment at Broadlawns, there is an option for up to 14 days of continued support in a house in the community before returning to one's primary place of residence.

There are several services that we are planning for FY14 and FY15 that will complement the current options. The goal of these additional options–denoted below with an asterisk (*) is to engage people at an earlier stage of crisis to avoid more intensive services. Peer support crisis aversion based on the Keya House in Lincoln, Nebraska is one option. A Keya House type service would increase our options for peer support and provide a respite option for people before a crisis developed. The addition of Access Point personnel at the Central lowa Shelter will engage people in community supports to avoid intensive services like emergency rooms and inpatient hospitalization. We believe it will also help with preventing law enforcement intervention. The 23–Hour Crisis Stabilization Center is specifically targeted as a diversion service from inpatient hospitalization and jail. A final option that is on the drawing board for FY15 is a short–term center for people in transition in their lives. The goal of the center is to catch people in transitional phases of their lives and provide stabilization, assessment, intensive outpatient treatment, and planning to prepare the person for the next stage of community tenure.

The chart below is a listing of current Polk County crisis services.

<u>Service</u>	Crisis Function	<u>Provider</u>	Contact Information
Mental Health First Aid	Mental Health training for the	Polk County Health Services	Polk County Health Services
	community		515-243-4545
Polk County Mental Health	Prevention, supportive	Volunteers, sponsored by Polk	515-954-0409
Response Team	counseling, and debriefing	County Health Services	
Polk County Positive Behavior	Training consortium for Positive	Partnership between Polk	Polk County Health Services:
Support Network (PCPBSN)	Behavior Support and Evidence	County Health Services and	515-243-4545
	Based Practices which includes	Network Providers who become	
	Motivational Interviewing	members of the PCPBSN	
*Crisis Aversion	Community based peer support	To be determined. This is in	N/A
	crisis aversion - based on Keya	our FY15 Plan and Budget.	
	House Model		
*System Intake	Specifically for Central Iowa	To be determined. This service	N/A
	Shelter and Service to engage	is set to begin by April 1, 2014.	
	people in services during		
	homeless crises		
Crisis Team	Hospital based 24/7 telephonic	Broadlawns Medical Center	515-282-5752
	and walk-in access at hospital		
	for crisis resolution and		
	screening for inpatient		
	treatment		
Mobile Crisis Response Team	Police based mental health	Eyerly Ball Community Mental	911
	support for diversion from	Health Services	
	hospital and jail		
Hospital Step-Down	Short-term 24-hour support	Broadlawns Medical Center	Currently for Broadlawns
	before returning to primary		patients only
	residence		

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Service	Crisis Function	<u>Provider</u>	Contact Information
*23-Hour Crisis Stabilization	23 hour crisis assessment,	Eyerly Ball Community Mental	N/A
	stabilization and referral	Health Services; target begin	
		date is July 1, 2014.	
*Transitional stabilization and	Up to 90 day center for	Eyerly Ball Community Mental	N/A
community based assessment,	continued crisis stabilization,	Health Services; target date is	
readiness and treatment unit	treatment engagement and	first quarter of 2015.	
	preparation for permanent		
	housing and support solutions		

C. Scope of Services & Budget

The annual budget and planning process is utilized to identify and implement core disability service improvements. The Polk County Region collaborates with stakeholders to assess need and to advocate adequate funding for services and supports in the initial core and additional core service domains. Polk County is the funder of last resort. Additional funding sources are used to empower individuals to reach their fullest potential. The Polk County Region is responsible for services that are authorized in accordance with the Regional Management Plan and within the constraints of budgeted dollars. Services funded by PCHS are subject to change or termination with the development of the annual budget each fiscal year. The Regional Management Plan Policy & Procedure Manual addresses mandated services access standards.

Annually, Polk County Health Services reviews actual expenditures and services provided, stakeholder input and participation, quality assurance implementation findings, waitlist information, progress toward goals and objectives, and, if any, appeal type and resolution to determine if gaps in services or barriers to services exist. In December of each year this review is submitted to the Department of Human Services. In addition, the Department of Human Services provided the following information about service capacity. The Polk region's results are better than the statewide results for all but one item.

a) A penetration rate that is at least <u>equal to or exceeds</u> the statewide per capita average for individuals with a mental illness or individuals with an intellectual disability.

County Name	Population	MI/CMI/ID People Served	MI/CMI/ID Rate per 10,000
Polk	326,207	6,260	191.9
Statewide Total	2,337,939	44,309	189.5

b) A per capita use of inpatient psychiatric hospital services that is <u>less than or equal to</u> the statewide per capita average.

County Name	Population	Days	Days Per 10,000
Polk	326,207	4,349	133.3
Statewide Total	2,337,939	35,513	151.9

c) A per capita use of intermediate care facilities for individuals with intellectual disabilities that is <u>less than or equal</u> to the statewide per capita average.

County Name	Population	Days	Days Per 10,000
Polk	326,207	61,056	2,292.4
Statewide Total	2,337,939	508,710	2,521.3

d) A per capita use of outpatient mental health services that is <u>greater than or equal to</u> the statewide per capita average.

County Name	Population	Days	Days Per 10,000
Polk	326,207	3,435	105.3
Statewide Total	2,337,939	21,377	91.4

e) A per capita use of supported community living services that is greater than or equal to the statewide per capita average.

County Name	Population	All DG People Served	All DG Rate Per 10,000
Polk	326,207	1,527	46.8
Statewide Total	2,337,939	11,628	49.7

f) An average cost of service per individual served that is equal to or less than the statewide average.

County Name	MI/CMI/ID County Paid Amount	MI/CMI/ID Clients	MI/CMI/ID Cost/Person
Polk	\$36,803,922	6,260	\$5,879
Statewide Total	\$291,958,344	44,301	\$6,590

g) Administrative costs, as a percentage of non-Medicaid service expenditures, that are less than or equal to the statewide average.

County Name	Admin	Estimated Non-Medicaid Costs	% of Non-Medicaid Costs
Polk	\$1,686,823	\$18,735,165	9.0%
Statewide Total	\$12,809,846	\$133,903,346	9.6%

(Source: Fiscal Year 2012 County Reports and ICF/ID County Billings, Prepared by DHS, 3/18/13).

Polk County developed a provider network based on projections of incidence and prevalence of need for the priority population groups discussed in this plan. As noted, Polk County consults with the provider network and community at large to develop plans and services to meet the need. When we compare the current system of care with the Access Standards in IAC 441–25.3, we believe the parts are in place and are meeting the requirements for access with exceptions as noted below. We routinely work with providers when access is an issue to eliminate wait times, but as we indicate below, there are a number of variables that influence access times. Some of the variables are within a region's ability to impact change and some are not.

Polk County has three Community Mental Health Centers, one for children and two for adults and three inpatient psychiatric units that are very conveniently located within thirty miles of citizens' residences. Crisis services are available in each of these three hospitals and Broadlawns has a specialty Crisis Team located adjacent to the Emergency Room available twenty four hours a day, seven days each week, 365 days per year. The Crisis Team at Broadlawns and Mobile Crisis Response Team has served as the provider of Emergency and Urgent care needs of the citizens of Polk County. The standard for meeting emergency outpatient services within 15 minutes varies a bit by each Center but each center would initiate outpatient services as quickly as possible or refer the person to one of the hospitals for emergency care. The

standard for meeting urgent care needs within one hour of presentation or within twenty four hours of a call to a Community Mental Center is met when scheduling permits and if schedules do not permit, a person would be seen as quickly as possible or referred to Broadlawns emergency room or walk in clinic.

Historically, we set a goal that the elapsed time between first contact for outpatient services and first provided service does not exceed ten days. As of the writing of this section of the Management Plan, Eyerly Ball schedules people for therapy seventeen days from the time of contact and it is typically another eighteen days to see a prescriber. Des Moines Child Guidance Center does emergency intakes and the time to get someone seen by therapist or prescriber may be longer than fifteen minutes but these emergency intakes are completed within twenty four hours. The Child Guidance Center does have an emergency crisis telephone line to support parents after hours in emergent type situations. On a routine basis, in May the wait was 6.9 days for a therapist and 15.9 days for a prescriber. For emergency and urgent care needs, Broadlawns uses the Crisis Team to see people and triage to the appropriate service. The routine wait for a therapist is typically six weeks and under four weeks to see a prescriber. When a person is hospitalized, the person is seen within seven days of discharge by an LISW and a mid-level prescriber.

While our providers may not meet this standard in all cases, there are alternative services available to meet people's emergency and urgent care needs that exceed the basic requirements of the State for emergency services. The fact is that in lowa there is a shortage of LISWs and either mid-level or physician prescribers that affects access time. This is not just the case with our "safety net" providers but our anecdotal reports indicate that even getting appointments with private prescribers exceed the benchmark of four weeks. This is a metric that we continue to track and work with our provider network to meet. It is complicated, however we are very willing to tackle this problem, which must be addressed as a collective effort between the State DHS, Regions, Magellan, Private Insurance Companies, University of Iowa, Regents and the Iowa Legislature.

Polk County has three inpatient psychiatric facilities. People, in need of emergency inpatient treatment are able to access the treatment within 24 hours. There are times that a person may be diverted from our designated inpatient facility but the person can receive treatment within twenty four hours at another hospital. Nevertheless, this is a metric that we collect. Historically, about ten to fifteen people each month are diverted to other hospitals in Polk County and about the same number are diverted to hospitals outside Polk County. In rare occasions, a person must wait in the Broadlawns Crisis Team more than twenty four hours to get transferred to an inpatient facility. In those cases, the person receives treatment in the Emergency Room. The shortage of beds is not new. It is the reason however, that we are developing an array of crisis services to support people in crisis outside the hospital and make the best use of our current capacity. Broadlawns provides follow up outpatient care within seven days of discharge from the hospital or coordinates with the person's provider for follow up care.

A number of supportive services are available in Polk County including but not limited to the three classes of services noted in the Access Standards. People can access service coordination and any community support service within thirty miles of where they live and within four weeks of the individual's request for the service. In many cases, the support services are delivered to the person, in the person's home. We believe the need for supportive services is met and we work with network providers to expand service capacity to meet demand, as necessary. We are fortunate in having multiple providers that offer the same or functionally equivalent types of services so if one provider has a waiting list another can

provide the service. For example, if a provider has a waiting list for Supported Community Living, we can refer to another provider of the service or offer an integrated wrap around service and make an emergency assignment or if the person has Medicaid and meets Magellan criteria, the person may be enrolled in a PACT program. Nevertheless, these are metrics we will add to our quality assurance program. With respect to Home and Vehicle Modifications, we follow Medicaid guidelines.

The Polk County Health Services Chief Executive Officer and Administrative Team proposed the FY15 budget. In November of 2013, the Polk County Health Services Board of Directors reviewed and recommended the budget to the Polk County Board of Supervisors. The Board of Supervisors adopted the FY15 Budget in March of 2014. Polk County Health Services is responsible for managing and monitoring the adopted budget. The following charts show the FY15 Budget revenues and the expenses by Initial and Additional Core Service Domain and Other Services. If a particular service has a "Yes" in the Priority Population or Additional Population column, but the corresponding budget column has \$0, the Polk County Region will pay for that service for a member of the identified population, even though historically there has not been a need.

Revenue Source	FY15 Budget
Property Taxes	\$14,439,175
State Per Capita Equalization Funds	\$6,539,434
SPP/SSBG Allocation	\$1,217,886
Case Management Fees	\$6,500,000
Reimbursements from Other Counties	\$58,000
Refunds	\$2,100
Interim Assistance Reimbursements	\$76,600
Client Repayments	\$5,300
Total	\$28,838,495

Core Service Domain: Specific Service	Description/Service Access Standards	Priority Population	Additional Population	FY15 Budget Priority Population	FY15 Budget Additional Population	Additional Funding Sources	
	Initial Core Services						
Treatment: Assessment & Evaluation	The clinical review by a mental health professional of the current functioning of the individual using the service in regard to the individual's situation, needs, strengths, abilities, desires and goals to determine the appropriate level of care. An individual who has received inpatient services shall be assessed and evaluated within four weeks.	Yes	Yes	\$ 11,244	\$ 61,205	Medicaid, Insurance	
Treatment: MH Outpatient Therapy	Services will consist of evaluation and treatment services provided on an ambulatory basis for the target population including psychiatric evaluation, medication management and individual, family, and group therapy. Emergency: During an emergency, outpatient services shall be initiated to an individual within 15 minutes of telephone contact. See Crisis Response Services. Urgent: Outpatient services shall be provided to an individual within one hour of presentation or 24 hours of telephone contact. See Crisis Response Services. Routine: Outpatient services shall be provided to an individual within four weeks of request for appointment. Distance: Outpatient services shall be offered within 30 miles.	Yes	Yes	\$ 1,441,783	\$ 120,769	Medicaid, Insurance	

Core Service Domain: Specific Service	Description/Service Access Standards	Priority Population	Additional Population	FY15 Budget Priority Population	FY15 Budget Additional Population	Additional Funding Sources
Treatment: Medication Prescribing & Management	Services provided directly to or on behalf of the individual by a licensed professional as authorized by lowa law including, but not limited to, monitoring effectiveness of and compliance with a medication regimen; coordination with care providers; investigating potentially negative or unintended psychopharmacologic or medical interactions; reviewing laboratory reports; and activities pursuant to licensed prescriber orders. Services with the individual present provided by an appropriately licensed professional as authorized by lowa law including, but not limited to, determining how the medication is affecting the individual; determining any drug interactions or adverse drug effects on the individual; determining the proper dosage level; and prescribing medication for the individual for the period of time before the individual is seen again.	Yes	Yes	\$ 1,238,269	\$ 10,963	Medicaid, Insurance
Treatment: MH Inpatient Treatment	Acute inpatient mental health services are 24-hour settings that provide services to treat acute psychiatric conditions. Primary goal is to provide a comprehensive evaluation, rapidly stabilize symptoms, address health and safety needs and develop a comprehensive and appropriate discharge plan. An individual in need of emergency inpatient services shall receive treatment within 24 hours. Inpatient services are available within the Region, although services outside the region may be necessary if all beds in Polk County are full.	Yes	Yes	\$ 1,466,290	\$ -	Medicaid, Insurance

Core Service Domain: Specific Service	Description/Service Access Standards	Priority Population	Additional Population	FY15 Budget Priority Population	FY15 Budget Additional Population	Additional Funding Sources
Treatment: Medications *	Prescription psychiatric medications to treat a mental health diagnosis.	Yes	Yes	\$ 482,363	\$ -	Medicaid, Insurance
Treatment: Partial Hospitalization *	Active treatment program providing intensive services in a structured therapeutic environment.	Yes	Yes	\$ -	\$ -	Medicaid, Insurance
Treatment: Day Treatment *	Individualized services emphasizing mental health treatment and intensive psychiatric rehabilitation.	Yes	Yes	\$ -	\$ 40,600	Medicaid, Insurance
Treatment: Community Support Programs *	Comprehensive programs to meet individual treatment and support needs in a community setting	Yes	Yes	\$ 3,777,106	\$ 732,462	Medicaid, Insurance
Basic Crisis Response: 24-hour Access to Crisis Response	Program designed to stabilize an acute crisis episode, which is available 24 hours a day, 365 days a year. Crisis services shall be available 24 hours per day, seven days per week, 365 days per year for mental health and disability-related emergencies.	Yes	Yes	\$ -	\$ -	
Basic Crisis Response: Evaluation	The process used with an individual to collect information related to the individual's history and needs, strengths, and abilities in order to determine appropriate services or referral during an acute crisis episode. Crisis Evaluation will be provided within 24 hours of request.	Yes	Yes	\$ -	\$ -	
Basic Crisis Response: Personal Emergency Response System	An electronic device connected to a 24-hour staffed system which allows the individual to access assistance in the event of an emergency.	Yes	Yes	\$ -	\$ -	Medicaid
Support for Community Living: Home Health Aide	Unskilled medical services which provide direct personal care. This service may include assistance with activities of daily living, such as helping the recipient to bathe, get in and out of bed, care for hair and teeth, exercise, and take medications specifically ordered by the physician.	Yes	Yes	\$ 189,298	\$ 61,558	

Core Service Domain: Specific Service	Description/Service Access Standards	Priority Population	Additional Population	FY15 Budget Priority Population	FY15 Budget Additional Population	Additional Funding Sources
Support for Community Living: Home & Vehicle Mod	A service that provides physical modifications to the home or vehicle that directly address the medical health or remedial needs of the individual that are necessary to provide for the health, welfare, and safety of the member and to increase or maintain independence.	Yes	Yes	\$ -	\$ -	Medicaid
Support for Community Living: Respite	A temporary period of relief and support for individuals and their families provided in a variety of settings. The intent is to provide a safe environment with staff assistance for individuals who lack an adequate support system to address current issues related to a disability. Respite may be provided for a defined period of time; respite is either planned or provided in response to a crisis. The first appointment shall occur within four weeks of the individual's request of support for community living.	Yes	Yes	\$ -	\$ 1,888	Medicaid
Support for Community Living: Supportive Community Living (Daily) 1	Services and supports to enhance an individual's ability to regain or attain higher levels of independence or to maximize current levels of functioning.	Yes	Yes	\$ 288,349	\$ 90,920	Medicaid
Support for Community Living: Supportive Community Living (Hourly)	Services provided in a non- institutional setting to adult persons with mental illness, intellectual, or developmental disabilities to meet the persons' daily living needs.	Yes	Yes	\$ 1,208,694	\$ 619,809	Medicaid
Support for Community Living: Transportation *	Transportation to allow an individual to conduct business errands, shop, receive medical services, work, recreate, attend school, and reduce social isolation.	Yes	Yes	\$ 138,140	\$ 66,442	Medicaid

Core Service Domain: Specific Service	Description/Service Access Standards	Priority Population	Additional Population	FY15 Budget Priority Population	FY15 Budget Additional Population	Additional Funding Sources
Support for Community Living: Payee *	Activities provided to manage an individual's finances.	Yes	Yes	\$ 110,690	\$ -	
Support for Community Living: In-Home Nursing *	Nursing services provided in an individual's home.	Yes	Yes	\$ -	\$ -	Medicaid
Support for Community Living: Rent Assistance *	General Assistance or on-going rent support provided through an organized program to allow an individual to maintain an affordable home in the community.	Yes	Yes	\$ 672,612	\$ 2,965	Section 8, state subsidy, Shelter Plus Care
Support for Community Living: Food, Utilities, Legal, etc. *	Assistance for basic needs.	Yes	Yes	\$ 99,674	\$ 950	
Support for Employment: Day Habilitation	Services that assist or support the individual in developing or maintaining life skills and community integration. Services will enable or enhance the individual's functioning, physical and emotional health and development, language and communication development, cognitive functioning, socialization and community integration, functional skill development, behavior management, responsibility and self-direction, daily living activities, self-advocacy skills, or mobility. For all Support for Employment services, the initial referral shall take place within 60 days of the individual's request of support for employment.	Yes	Yes	\$ 55,593	\$ 3,316	Medicaid

Core Service Domain: Specific Service	Description/Service Access Standards	Priority Population	Additional Population	FY15 Budget Priority Population	FY15 Budget Additional Population	Additional Funding Sources
Support for Employment: Job Development	Services that assist individuals in preparing for, securing and maintaining gainful, competitive employment. Employment will be integrated into normalized work settings, will provide pay of at least minimum wage, and will be based on the individual's skills, preferences, abilities, and talents.	Yes	Yes	Included below	Included below	Medicaid
Support for Employment: Supported Employment	An approach to helping individuals participate as much as possible in competitive work in integrated work settings that are consistent with the strengths, resources, priorities, concerns, abilities, capabilities, interests, and informed choice of the individuals. Services are targeted for individuals with significant disabilities for whom competitive employment has not traditionally occurred; or for whom competitive employment has been interrupted or intermittent as a result of a significant disability including either individual or group supported employment, or both, consistent with evidence–based practice standards published by the Substance Abuse and Mental Health Services	Yes	Yes	\$ 531,934	\$ 163,317	Medicaid
Support for Employment: Prevocational Services	Services that focus on developing generalized skills that prepare an individual for employment. Prevocational training topics include but are not limited to attendance, safety skills, following directions, and staying on task.	Yes	Yes	\$ 155,457	\$ 12,574	Medicaid
Support for Employment: Enclave *	Job and training activities in business and industry setting for groups of workers with disabilities.	Yes	Yes	\$ 49,475	\$ 6,462	Medicaid

Core Service Domain: Specific Service	Description/Service Access Standards	Priority Population	Additional Population	FY15 Budget Priority Population	FY15 Budget Additional Population	Additional Funding Sources
Support for Employment: Clubhouse *	An intentional community designed to create a restorative environment within which individuals develop skills necessary to gain employment, as well as improve social connectedness with the community.	Yes	Yes	\$ 21,218	\$ -	Medicaid
Support for Employment: Employment Skills Training *	Training to assist an individual in in gaining hard skills in an occupation or job grouping or soft employment skills for the purpose of increasing employable skills.	Yes	Yes	\$ 136,363	\$ 6,954	
Support for Employment: Supported Education *	Supports provided to individuals enrolled in a post-secondary institution or other employer recognized certificate program.	Yes	Yes	\$ 10,000	\$ 17,913	
Recovery Services: Family Support	Services provided by a family support peer specialist that assists the family of an individual to live successfully in the family or community including, but not limited to, education and information, individual advocacy, family support groups, and crisis response. For all Recovery Services, individuals shall not have to travel more than 30 miles to receive services.	Yes	Yes	\$ -	\$ -	Medicaid
Recovery Services: Peer Support	A program provided by a peer support specialist including but not limited to education and information, individual advocacy, family support groups, crisis response, and respite to assist individuals in achieving stability in the community.	Yes	Yes	\$ 320,000	\$ -	Medicaid

Core Service Domain: Specific Service	Description/Service Access Standards	Priority Population	Additional Population	FY15 Budget Priority Population	FY15 Budget Additional Population	Additional Funding Sources
Service Coordination: Case Management	Service provided by a case manager who assists individuals in gaining access to needed medical, social, educational, and other services through assessment, development of a care plan, referral, monitoring and follow-up using a strengths-based service approach that helps individuals achieve specific desired outcomes leading to a healthy self-reliance and interdependence with their community. For all Service Coordination services, individuals shall not have to travel more than 30 miles to receive services. An individual shall receive service coordination within 10 days of the initial request or being discharged from an inpatient facility.	Yes	Yes	\$ 56,650	\$ -	Medicaid
Service Coordination: Health Homes	A service model that facilitates access to an interdisciplinary array of medical care, behavioral health care, and community-based social services and supports for both children and adults with chronic conditions. Services may include comprehensive care management; care coordination and health promotion; comprehensive transitional care from inpatient to other settings, including appropriate follow-up; individual and family support, which includes authorized representatives; referral to community and social support services, if relevant; and the use of health information technology to link services, as feasible and appropriate.	Yes	Yes	\$ 78,200	\$ -	Medicaid
Service Coordination: Service	Activities designed to help individuals and families identify service needs and coordinate service	Yes	Yes	\$ 753,758	\$ 128,510	
Coordination *	delivery.					

Core Service Domain: Specific Service	Description/Service Access Standards	Priority Population	Additional Population	FY15 Budget Priority Population	FY15 Budget Additional Population	Additional Funding Sources	
	Additional Core Services						
Comprehensive Crisis Services: 24– hour Crisis Hotline	Program that operates a crisis hotline to relieve distress in pre-crisis and crisis situations, reduce the risk of escalation, arrange for emergency on-site responses, and refer callers to appropriate services	Yes	Yes	\$ -	\$ -		
Comprehensive Crisis Services: Mobile Response	Crisis evaluation and treatment services provided by a team of professionals deployed into the community.	Yes	Yes	\$ 444,316	\$ -	Medicaid	
Comprehensive Crisis Services: 23– Hour, Stabilization Facility	Crisis evaluation and stabilization provided by nurses and supervised by a psychiatrist for less than 24 hours.	Yes	Yes	\$ 1,000,000	\$ -	Medicaid	
Comprehensive Crisis Services: Crisis Residential Services	Crisis evaluation and stabilization provided in a temporary residential setting.	Yes	Yes	\$ -	\$ -		
Justice-Involved Services: Jail Diversion	Program that is designed to divert individuals from jail by providing assessment, coordination and supportive services.	Yes	Yes	\$ 208,363	\$ -		
Justice-Involved Services: Crisis Intervention Training	Program that trains law enforcement officers on techniques for intervening with individuals experiencing acute crises.	Yes	Yes	\$ -	\$ -	Des Moines Police Department Law Enforcement Academy	
Justice-Involved Services: Civil Commitment Prescreening	Program that provides assessment of individuals for whom family members are considering filing an application for involuntary commitment to determine if another course of treatment is appropriate.	Yes	Yes	\$ 100,000	Included in Priority Pop \$		
Justice-Involved Services: MH Treatment in Jail *	Evaluation and treatment services provided to individuals while they are in jail.	Yes	Yes	\$ 188,688	Included in Priority Pop \$		

Core Service Domain: Specific Service	Description/Service Access Standards	Priority Population	Additional Population	FY15 Budget Priority Population	FY15 Budget Additional Population	Additional Funding Sources
Advances in EBPs: PBS		Yes	Yes	Included in Consultation	Included in Priority Pop \$	
Advances in EBPs: ACT		Yes	No	\$ 833,583	\$ -	
Advances in EBPs: Peer Self-Help Drop-In Centers		No	No	\$ -	\$ -	
Advances in EBPs: IPR *		Yes	Yes	\$ 49,262	\$ -	Medicaid
		Other Ser	vices			
Consultation *	Advisory activities directed to a service provider to assist the provider in delivering services to a specific person or in planning, developing, or implementing programs; solving administrative problems; or addressing other concerns in the provider's organization.	Yes	Yes	\$ 56,348	Included in Priority Pop \$	
Public Education *	Activities provided to increase awareness and understanding of the causes and nature of conditions or situations which affect an individual's functioning in society	Yes	Yes	\$ 15,889	Included in Priority Pop \$	
RCF/ID/PMI *	Facilities licensed as residential care facilities, including those with special licenses for individuals with intellectual disabilities or for persons with mental illness.	Yes	Yes	\$ 648,824	\$ 37,046	Medicaid
ICF/ID/PMI *	Facilities licensed as intermediate care facilities, including those with special licenses for individuals with intellectual disabilities or for persons with mental illness.	Yes	Yes	\$ -	\$ -	Medicaid
Civil Commitments *	Evaluations, transportation, legal representation, mental health advocates, and other services provided to individuals undergoing civil commitment	Yes	Yes	\$ 157,517	Included in Priority Pop \$	

Core Service Domain: Specific Service	Description / Service Access Standards	Priority Population	Additional Population	FY15 Budget Priority Population	FY15 Budget Additional Population	Additional Funding Sources
Administration	Activities necessary to manage the service system	Yes	Yes	\$ 1,618,783	Included in Priority Pop \$	
TCM Pass-Through	Expenses associated with county- provided targeted case management, for which Medicaid reimbursement is expected.	Yes	Yes	\$ 6,511,820	Included in Priority Pop \$	
Grand Total				\$ 25,126,553	\$ 2,186,623	
* Specific service not	included in legislation					

D. Financial Forecasting Measures

Historical service utilization is the starting point for all financial projections. Throughout the year; PCHS staff and stakeholders identify unmet needs and areas for service development, which are incorporated into subsequent strategic plans and budgets. Strategic plan priorities are identified in the areas of system infrastructure, community living, employment, and treatment.

Strategic Plan Priority Area	FY15 Strategy	Projected Cost
System Resources &	Incentive payments for intensive care coordination for about 800 individuals	\$67,200
Infrastructure System Resources &	Work with a local organization to recruit, organize, and support a Consumer	\$20,000
Infrastructure	Council	
Employment	Reinstate Supported Education	\$10,000
Community Living	Develop community living alternatives for individuals living outside of Polk	\$50,000
	County or for individuals needing services within Polk County	
Community Living	Implement incentive payments for Community Living Providers	\$200,000
Treatment	Jail Diversion - add one FTE to the staff and purchase a vehicle	\$85,000
Treatment	Pre-Commitment Screening - add one FTE at Eyerly-Ball	\$100,000
Treatment	Develop Crisis Stabilization Center - annual operations	\$1,000,000
Treatment	Develop Crisis Aversion Keya House Model	\$300,000

E. Provider Reimbursement Provisions

Polk County will contract with MHDS providers whose base of operation is in the region. Polk County may also honor contracts that other regions have with their local providers or may choose to contract with providers outside of the Region. A contract may not be required with providers that provide one–time or as needed services.

Over the past several years, Polk County has used its contracting capacity to implement a series of strategies for moving towards outcome-based payments. Polk County uses a mix of fee-for-service, fee-for-service with performance payments, and capitated case rates for most of its services. It provides block grants only for specific population based activities where billing by individual served is impossible or impracticable. Non-traditional provider contracts are used in instances when services are provided by individuals or families.

Polk County service contracts require that all providers meet all applicable licensure, accreditation or certification standards; however Polk County makes serious efforts to stimulate access to more natural supports in its service provider network. Successful attainment of positive outcomes, consumer and family satisfaction, and cost effectiveness measures are the most important factors in continued network participation.

PCHS has identified access points within the provider network to assist individuals or their representatives to apply for services. Individuals needing outpatient mental health services, inpatient mental health services or psychiatric medications may apply for services at one of the Community Mental Health Centers. For those who need long-term services, they may apply at any of the access points. They will meet with a Service Coordinator who will assist in accessing all local, state and federal benefits such as Medicaid, lowa Health and Wellness, food stamps, Social Security benefits, General Assistance, housing assistance, etc. Service coordinators are SOAR trained to assist those who are homeless and needing to apply for Social Security benefits. An assessment is completed to determine which long-term coordination service is needed. A warm hand off takes place with the long-term coordination program, possibilities include Integrated Health Home, Targeted Case Management, Assertive Community Treatment teams, Integrated Services Agency and Long-term Service Coordination. The long-term coordination programs are responsible for ensuring that all needed services are obtained, regardless of funding source.

Polk County Regional Network of Providers	Funded Programs in the Polk County Region
Behavioral Technologies	Supported Community Living
2601 E. University Avenue	Enclave
Des Moines, IA 50317	Day Activity Program
Tele: (515) 283-9109	
Broadlawns Medical Center - BMC	Adult Inpatient Psych
1801 Hickman Road	Adult Outpatient Psych
Des Moines, IA 50314	Adult Day Treatment
Tele: (515) 282-2200	Adolescent Day Treatment (FOCUS)
	Dual Diagnosis Services (mental illness and substance abuse)
	RCF/PMI
BMC-Community Access Program	Case Management
2300 Euclid Ave., Suite B	Integrated Health Home - Intensive Care Coordination
Des Moines, IA 50310	Service Coordination
Tele: (515) 282-6770	Supported Community Living
BMC-PATH	Integrated Services Program
2300 Euclid Ave., Suite B	
Des Moines, IA 50310	
Tele: (515) 282-6750	

Polk County Regional Network of Providers	Funded Programs in the Polk County Region
Candeo	Supported Community Living
9550 White Oak Lane	Supported Employment
Johnston, IA 50131	Employment Skills Training
Tele: (515) 259–8110	
Child Guidance Center, a division of Orchard Place	Outpatient Psychiatric Treatment
808 5th Avenue	Outreach
Des Moines, IA 50309	
Tele: (515) 244–2267	
Children & Families of Iowa	Representative Payee
1111 University Avenue	
Des Moines, IA 50314	
Tele: (515) 288-1981	
ChildServe	Case Management
Box 707	Respite
Johnston, IA 50131	Supported Community Living
Tele: (515) 727-8750	In-Home Home Health Care Services
	Day Habilitation Services
Christian Opportunity Center	Supported Community Living
Box 345	
Pella, IA 50219	
Tele: (515) 628-1162	
Community Support Advocates	Integrated Services Project
6000 Aurora Avenue, Suite B	Case Management
Des Moines, Iowa 50322	Integrated Health Home - Intensive Care Coordination
Tele: (515) 883-1776	Service Coordination
Crest	RCF/ID
3015 Merle Hay Rd, Suite #6	Supported Community Living
Des Moines, IA 50310	
Tele: (515) 331–1200	
Des Moines Area Regional Transit	Transportation
1100 DART Way	
Des Moines, IA 50309	
Tele: (515) 283-8111	
Easter Seal Society	Integrated Services Program
2920 30th Street	Case Management
Des Moines, IA 50310	Service Coordination
Tele: (515) 274–1529	Supported Community Living
	Respite
	Adult Day Activity
	Employment Skills Training
	Supported Education
	Supported Employment

Polk County Regional Network of Providers	Funded Programs in the Polk County Region
Eyerly-Ball Community Mental Health Services	Outpatient Psychiatric and In-Office Clinical Treatment & Evaluation
1301 Center Street	Senior Outreach Counseling
Des Moines, IA 50309	Mobile Crisis Team
Tele: (515) 243–5181	Mental Health Jail Diversion
	Integrated Health Home - Intensive Care Coordination
	Forensic Assertive Community Treatment
	RCF/PMI
	Service Coordination
	Supported Community Living
Golden Circle Behavioral Health	Integrated Services Program
945 19th Street	
Des Moines, IA 50314	
Tele: (515) 241-0982	
Goodwill Industries of Central Iowa	Supported Employment
4900 NE 22nd Street	Adult Day Activity
Des Moines, IA 50313	Work Activity
Tele: (515) 265-5323	Employment Skills Training
Homestead	Supported Community Living
1625 Adventureland Drive, Suite B	Respite
Altoona, IA 50009	Work Activity
Tele: (515) 967-4369	
H.O.P.E.	Supported Community Living
P.O. Box 13374	Supported Employment
Des Moines, IA 50310	Respite
Tele: (515) 277-4673	
Link Associates	Case Management
1452 29th Street	Service Coordination
West Des Moines, IA 50266	Supported Community Living
Tele: (515) 262-8888	Respite
	RCF/ID
	Transportation
	Supported Employment
	Employment Skills Training
	Work Activity
	Adult Day Activity
Lutheran Services in Iowa	Respite
Des Moines Service Office	Supported Community Living
3125 Cottage Grove	
Des Moines, IA 50311	
Tele: (515) 274-4946	

Polk County Regional Network of Providers	Funded Programs in the Polk County Region
Mainstream Living, Inc.	Supervised Living Apartments
333 SW 9th Street	Supported Community Living
Des Moines, IA 50309	RCF/PMI
Tele: (515) 243-8115	
Mosaic	Supported Community Living
11141 Aurora, Building 3	
Urbandale, Iowa 50322	
Tele: (515) 246–1840	
Optimae LifeServices	Supported Community Living
602 East Grand Ave.	Community Integration
Des Moines, IA 50309	
Tele: (515) 283–1230	
Passageway	Psycho-social Clubhouse
305 15th Street	Supported Employment
Des Moines, IA 50309-3407	
Tele: (515) 243-6929	
Primary Health Care, Inc.	Homeless Outreach
2353 SE 14th Street	Pharmacy
Des Moines, IA 50320	
Tele: (515) 248–1400	
Progress Industries	Supported Community Living
5518 NW 88th Street	
Johnston, IA 50131	
Tele: (515) 557-1810	
Strawhacker and Associates	Rent Subsidy
4601 Westown Parkway	
Suite 220	
West Des Moines, IA 50266	
Tele: (515) 223-7370	
Telligen	Inpatient Utilization Review
1776 West Lakes Parkway	
West Des Moines, IA 50266	
Tele: (515) 223-2900	
Trans Iowa, L.C.	Transportation
1550 E Army Post Road	
Des Moines, Iowa 50320	
Tele: (515) 266-4500	
WesleyLife Community Services	Homemaker Service
P. O. Box 7192	Mobile Meals
944 18th Street	
Des Moines, IA 50309-7192	
Tele: (515) 288-3334	

F. Financial Eligibility Requirements

The financial resource eligibility criteria included in the Policy and Procedures Manual, which became effective July 1, 2014, are more restrictive than the criteria Polk County used prior to that date. Individuals who were eligible under the previous resource eligibility criteria will continue to be eligible as long as they meet those criteria. Polk County Health Services will consider granting director's exceptions to the financial resource eligibility criteria in effect July 1, 2014, on a case by case basis.